Fill in this information	to identify your case:	
Debtor 1	Gregory George Schlegel	
Debtor 2 (Spouse, if filing)	MaryLouise Ann Schlegel	
United States Bankru	otcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA	
Case number (If known)	-10198	Check if this is: An amended filing
		An amended hilling A supplement showing postpetition chapter 13 income as of the following date:
Official Form	<u> 1061</u>	MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Faralassa and adapter	☐ Employed	☐ Employed
	attach a separate page with information about additional	Employment status	■ Not employed	■ Not employed
	employers.	Occupation	Retired	Retired
	Include part-time, seasonal, or self-employed work.	Employer's name		
	Occupation may include student or homemaker, if it applies.	Employer's address		
		How long employed the	here?	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 0.00 \$ 0.00

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Official Form 106I Schedule I: Your Income page 1

	otor 1 otor 2	Gregory George Schlegel MaryLouise Ann Schlegel	-		Cas	e number (if ki	nown)	16-10	198		
	Con	y line 4 here	4.		Fo	or Debtor 1	0.00		Debtor filing s		
		,	-	-	٠.	`	<u></u>	· —		0.00	<u></u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5	a.	\$	(0.00	\$		0.00	<u> </u>
	5b.	Mandatory contributions for retirement plans	51	b.	\$	(0.00	\$		0.00	<u> </u>
	5c.	Voluntary contributions for retirement plans	-	C.	\$		0.00	\$		0.00	<u>) </u>
	5d.	Required repayments of retirement fund loans		d.	\$		0.00	\$		0.00	
	5e.	Insurance		e.	\$		0.00	\$		0.00	
	5f.	Domestic support obligations	51		\$		0.00	\$		0.00	_
	5g.	Union dues	5	-	\$		0.00	\$		0.00	_
	5h.	Other deductions. Specify:	_ 51	h.+	\$_	(0.00	+ \$		0.00	<u></u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	(0.00	\$		0.00	<u>) </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	(0.00	\$		0.00	<u>)</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8:	a.	\$	•	0.00	\$		0.00	
	8b.	Interest and dividends	-	b.	\$		0.00	\$-		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		c.	\$		0.00	\$		0.00	_
	8d.	Unemployment compensation	8	d.	\$		0.00	\$		0.00	_
	8e.	Social Security	8	e.	\$		0.00	\$	1,	529.00	
	8f. 8g. 8h.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	_ 81 _ 81	f. g. h.+	\$ \$	3,400		\$ \$ + \$	2,	0.00 200.00 0.00	<u> </u>
				Г		·		_			_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$_ 	3,400	0.00	\$	3	3,729.0	0
10	Cal	vulate manthly income. Add line 7 , line 0	10	φ		2 400 00	. 6	2.7	20.00	•	7 400 00
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		3,400.00	+ J	3,1	29.00	= • -	7,129.00
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	dep						chedule 11.	_	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							12.	\$	7,129.00
12	Do:	you expect an increase or decrease within the year after you file this form	2						ι	Combi month	ned ly income
13.		No. Yes. Explain:	·								